



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 01/31/2021

port Form Return completed form within 30 days to: Idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Annual Report: No filing fee if received by the due date.				Boise, ID 83720 Phone: (208) 334-2300	15
COS Control N		Filing Chahua, Astina			<u> </u>
SOS Control Number: 151933 Limited Liability Company (D)		Filing Status: Active-Existing Date Formed: 01/23/2006		ormation Locale: ID	021
		Date 1 office. 0 1/20/			
Name and Mai	-	(1) Add or Change Mailing Address:		9	
312 AMBER ST					S
CALDWELL, IC					
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Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address: JUDY HAWLEY					Ö O
312 AMBER ST					ceived
CALDWELL, ID 83605					~
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	No. The D.				ሿ
	Note: The Re	gistered Office address must be a	pnysical Idano add	ress (no postal box).	К
(3) New Registered Agent (RA) Signature: If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointed in item (2) above, the new agent must sign here to accept the appointed in item (2) above, the new agent must sign here to accept the appointed in item (2) above, the new agent must sign here to accept the appointed in item (2) above, the new agent must sign here to accept the appointed in item (2) above, the new agent must sign here to accept the appointed in item (2) above, the new agent must sign here to accept the appointed in item (3) above, the new agent must sign here to accept the appointed in item (3) above, the new agent must sign here to accept the appointed in item (3) above, the new agent must sign here to accept the appointed in item (3) above, the new agent must sign here to accept the appointed in item (4) above, the new agent must sign here to accept the appointed in item (4) above, the new agent must sign here to accept the appointed in item (4) above, the new agent must sign here to accept the appointed in item (4) above, the new agent must sign here to accept the appointed in item (4) above.					
		If a new agent is appoint	ed in item (2) above, ti	ne new agent must sign here to accept to	ne appointment
(4) Limited Liabili These will not be	ity Companies: Enter nar accepted. Changes here	mes and addresses of Managers e will not affect the entity mailing	OR Members. Do address. If more	o NOT put 'same as last year' or space is needed, please add an	'same as allove' attachmenn
Manager/Member	Name	Business Ad	dress	City, State, Zip	- 7
Mgr ☐Mem	Harold Po	a v Hawley 318	20 mbel	Caldwell	L 837.45
Mgr Mem	Tudy EHO	zwiey /3/20	mher	Cadwelly	1836 <u>85</u>
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(5) Signature:	ude Hai	whee	(6) Date:	-9-11	
(7) Type/Print Name	E Judy Ha	wen	(8) Title:	ecretary mar or	WICR
Instructions: Leg	ibly complete the form above	e. Sign and date this form and retur	n to the address prov	(/	De .